

# EXHIBIT D

**DECLARATION AND POWER  
OF ATTORNEY FOR UTILITY  
OR DESIGN**

**PATENT APPLICATION**

☐ Declaration Submitted with Initial Filing  
☐ Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16(e) required)

Attorney Docket No. 74622-040  
 First Named Inventor Lawrence P. Shields

*COMPLETE IF KNOWN*

Application Number 09/779,114  
 Filing Date February 8, 2001  
 Group Art Unit 3693  
 Examiner Name Jagdish Patel

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD FOR EXECUTION OF TRADES MADE PURSUANT TO  
STOCK OPTION AND PURCHASE PLANS**

the specification of which:

☐ is attached hereto;  
 OR

☒ was filed on 2/8/2001 as United States Application Number or PCT International

Application Number 09/779,114 and was last amended on 8/21/2006 (if applicable).  
 (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information known by me which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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60/182,399	02/14/2000	

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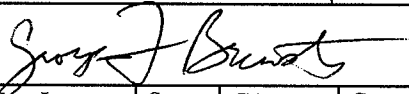
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Given Name (first and middle [if any])					Family Name or Surname				
Lawrence P.					Shields				
Inventor's Signature						Date			
Residence	City	New York	State	NY	Country	United States	Citizenship	United States	
Mailing Address	42 West 13 <sup>th</sup> Street, Apt. 5D								
Mailing Address (ln. 2)	City	New York	State	NY	ZIP	10011	Country	United States	
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Amod					Bhargava				
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Residence	City	Belle Mead	State	NJ	Country	United States	Citizenship	United States	
Mailing Address	63 Buckingham Drive								
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Given Name (first and middle [if any])				Family Name or Surname				
<b>George</b>				<b>Brewster</b>				
Inventor's Signature					Date	<b>12-29-07</b>		
Residence	City	<b>San Jose</b>	State	<b>CA</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
Mailing Address	<b>3171 Falls Creek Drive</b>							
Mailing Address (ln. 2)	City	<b>San Jose</b>	State	<b>CA</b>	ZIP	<b>95153</b>	Country	<b>United States</b>
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Inventor's Signature					Date			
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Mailing Address (ln. 2)	City	<b>River Vale</b>	State	<b>NJ</b>	ZIP	<b>07675</b>	Country	<b>United States</b>
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.								

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Michael					Cranor				
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# Declaration and Power of Attorney for Utility or Design Patent Application

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## DECLARATION – Utility or Design Patent Application

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<b>Keith</b>				<b>Carsten</b>				
Inventor's Signature				Date	1/12/08			
Residence	City	<b>Danville</b>	State	<b>CA</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
Mailing Address	<b>1009 Barrenger Drive</b>							
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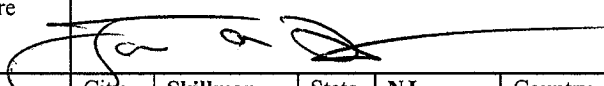
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Mailing Address	3171 Falls Creek Drive								
Mailing Address (In. 2)	City	San Jose	State	CA	ZIP	95153	Country	United States	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
James A.					Humza				
Inventor's Signature							Date	1/24/08	
Residence	City	Skillman	State	NJ	Country	United States	Citizenship	United States	
Mailing Address	4 Moselem Springs Court								
Mailing Address (In. 2)	City	Skillman	State	NJ	ZIP	08553	Country	United States	

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Given Name (first and middle [if any])					Family Name or Surname				
James P.					Mooney				
Inventor's Signature							Date		
Residence	City	River Vale	State	NJ	Country	United States	Citizenship	United States	
Mailing Address	105 Coopers Lane								
Mailing Address (In. 2)	City	River Vale	State	NJ	ZIP	07675	Country	United States	

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Declaration and Power of Attorney for Utility or Design Patent Application

Atty. Docket No.: 74622-040

Application No.: 09/779,114

Page 4 of 4

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Given Name (first and middle [if any])				Family Name or Surname				
<b>Robert H.</b>				<b>Maurer</b>				
Inventor's Signature						Date		
Residence	City	<b>Levittown</b>	State	<b>NY</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
Mailing Address	<b>2 Crabtree Lane</b>							
Mailing Address (ln. 2)	City	<b>Levittown</b>	State	<b>NY</b>	ZIP	<b>11756</b>	Country	<b>United States</b>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
<b>Michael</b>				<b>Cranor</b>				
Inventor's Signature						Date		
Residence	City	<b>Weehawken</b>	State	<b>NJ</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
Mailing Address	<b>49 Bonn Place Apt #3</b>							
Mailing Address (ln. 2)	City	<b>Weehawken</b>	State	<b>NJ</b>	ZIP	<b>07087</b>	Country	<b>United States</b>
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☐ Declaration Submitted with Initial Filing  
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Attorney Docket No. 74622-040  
First Named Inventor Lawrence P. Shields

**COMPLETE IF KNOWN**

Application Number 09/779,114  
Filing Date February 8, 2001  
Group Art Unit 3693  
Examiner Name Jagdish Patel

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the specification of which:

☐ is attached hereto;  
OR

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**Customer Number: 42532**

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Given Name (first and middle [if any])					Family Name or Surname					
Lawrence P.					Shields					
Inventor's Signature							Date			
Residence	City	New York	State	NY	Country	United States	Citizenship	United States		
Mailing Address	42 West 13 <sup>th</sup> Street, Apt. 5D									
Mailing Address (ln. 2)	City	New York	State	NY	ZIP	10011	Country	United States		
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])					Family Name or Surname					
Amod					Bhargava					
Inventor's Signature		<i>Amod Bhargava</i>					Date		Jan, 2, 2008	
Residence	City	Belle Mead	State	NJ	Country	United States	Citizenship	United States		
Mailing Address	63 Buckingham Drive									
Mailing Address (ln. 2)	City	Belle Mead	State	NJ	ZIP	08502	Country	United States		

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Page 3 of 4

<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
<b>Keith</b>				<b>Carsten</b>				
Inventor's Signature					Date			
Residence	City	<b>Danville</b>	State	<b>CA</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
Mailing Address		<b>1009 Barringer Drive</b>						
Mailing Address (ln. 2)	City	<b>Danville</b>	State	<b>CA</b>	ZIP	<b>94506</b>	Country	<b>United States</b>

<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
<b>George</b>				<b>Brewster</b>				
Inventor's Signature					Date			
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Mailing Address		<b>3171 Falls Creek Drive</b>						
Mailing Address (ln. 2)	City	<b>San Jose</b>	State	<b>CA</b>	ZIP	<b>95153</b>	Country	<b>United States</b>

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Inventor's Signature					Date			
Residence	City	<b>Skillman</b>	State	<b>NJ</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
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Inventor's Signature					Date			
Residence	City	<b>River Vale</b>	State	<b>NJ</b>	Country	<b>United States</b>	Citizenship	<b>United States</b>
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Mailing Address (ln. 2)	City	<b>River Vale</b>	State	<b>NJ</b>	ZIP	<b>07675</b>	Country	<b>United States</b>

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Michael					Cranor					
Inventor's Signature							Date			
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**PATENT APPLICATION**

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Attorney Docket No. 74622-040  
 First Named Inventor Lawrence P. Shields

**COMPLETE IF KNOWN**

Application Number 09/779,114  
 Filing Date February 8, 2001  
 Group Art Unit 3693  
 Examiner Name Jagdish Patel

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Lawrence P.					Shields				
Inventor's Signature							Date	3/10/08	
Residence	City	New York	State	NY	Country	United States	Citizenship	United States	
Mailing Address	42 West 13 <sup>th</sup> Street, Apt. 5D								
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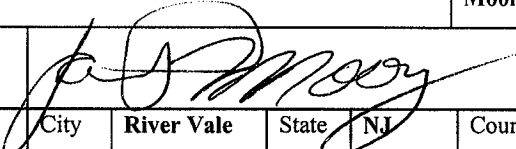
<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
Lawrence P.					Shields				
Inventor's Signature						Date			
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Mailing Address	42 West 13 <sup>th</sup> Street, Apt. 5D								
Mailing Address (In. 2)	City	New York	State	NY	ZIP	10011	Country	United States	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
Amod					Bhargava				
Inventor's Signature						Date			
Residence	City	Belle Mead	State	NJ	Country	United States	Citizenship	United States	
Mailing Address	63 Buckingham Drive								
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## Declaration and Power of Attorney for Utility or Design Patent Application

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
Keith					Carsten				
Inventor's Signature						Date			
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Mailing Address (In. 2)	City	Danville	State	CA	ZIP	94506	Country	United States	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
George					Brewster				
Inventor's Signature						Date			
Residence	City	San Jose	State	CA	Country	United States	Citizenship	United States	
Mailing Address		3171 Falls Creek Drive							
Mailing Address (In. 2)	City	San Jose	State	CA	ZIP	95153	Country	United States	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
James A.					Humza				
Inventor's Signature						Date			
Residence	City	Skillman	State	NJ	Country	United States	Citizenship	United States	
Mailing Address		4 Moselem Springs Court							
Mailing Address (In. 2)	City	Skillman	State	NJ	ZIP	08553	Country	United States	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname				
James P.					Mooney				
Inventor's Signature						Date		January 10, 2008	
Residence	City	River Vale	State	NJ	Country	United States	Citizenship	United States	
Mailing Address		105 Coopers Lane							
Mailing Address (In. 2)	City	River Vale	State	NJ	ZIP	07675	Country	United States	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.									



## Declaration and Power of Attorney for Utility or Design Patent Application

Atty. Docket No.: 74622-040

Application No.: 09/779,114

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Robert H.				Maurer				
Inventor's Signature						Date		
Residence	City	Levittown	State	NY	Country	United States	Citizenship	United States
Mailing Address	2 Crabtree Lane							
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Michael				Cranor				
Inventor's Signature						Date		
Residence	City	Weehawken	State	NJ	Country	United States	Citizenship	United States
Mailing Address	49 Bonn Place Apt #3							
Mailing Address (In. 2)	City	Weehawken	State	NJ	ZIP	07087	Country	United States
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) attached hereto.								